

**BHUTAN CRICKET COUNCIL BOARD
THIMPHU**

Name of the employee:

Number:

Designation:

Grade:

Date:

No. of fares:

Travel Authorization No. & Date:

Departure			Arrival			Daily Allowance	Mileage	Bus/Train/Airfare	Actual Expenses	Total
Date	Time	Station	Date	Time	Station					
Total in Words:										

Advance Taken:

Amount claimed for payment/refund

Certified that the travel was performed by me for official purposes and the claims are genuine.

Date & Signature of employee

Certified that the travel was authorized by me for official purposes and the claims appear genuine and reasonable.

Signature, Date & Seal of the Controlling Officer

Bhutan Cricket Council Board